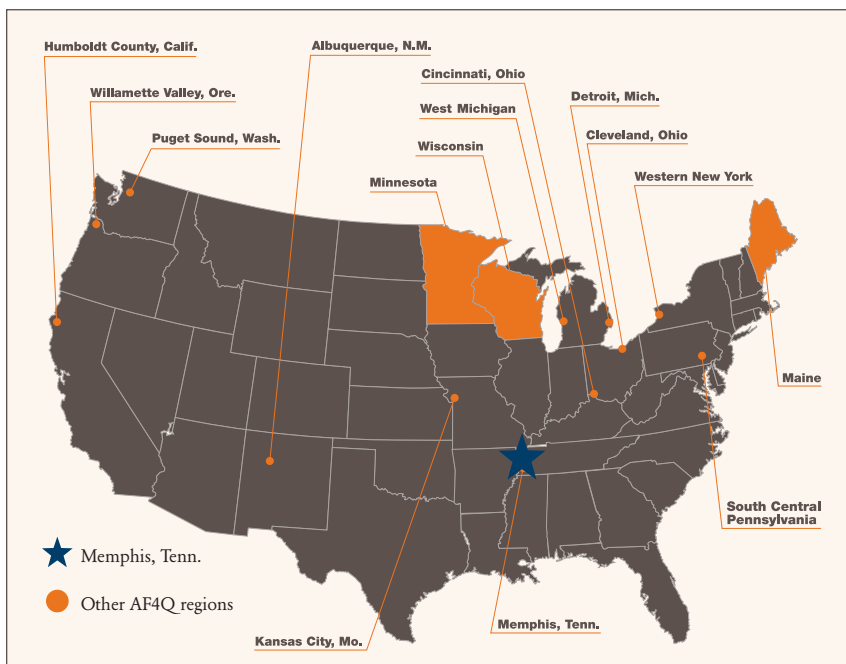


Aligning Forces for Quality in Memphis A Community Snapshot

The author David L. Cohn wrote in the mid-1930s that the Mississippi Delta truly began in the lobby of the opulent Peabody Hotel in Memphis, Tenn., where the region's cotton barons would meet to conduct business. And although King Cotton's days have long since passed, the city remains the Mid-South's economic and cultural center. The Mississippi River, a frequent subject of the jazz, blues, rock 'n' roll and soul music born in Memphis, helped ensure its place as an important inland port from its founding. More recently, it has evolved into a leading air transportation center. FedEx, one of the nation's largest air cargo haulers, is based there and it is also a regional hub for Northwest Airlines.

Like many other major U.S. cities, Memphis faces tough social problems, including serious health care challenges. According to the Dartmouth Atlas of Health Care, more than one in seven people with diabetes in the metropolitan region do not get crucial blood tests. African Americans there face a five-times greater risk than whites of losing a leg to the disease. Studies suggest that roughly half of all local adults lack fundamental knowledge about health.

Memphis is hardly alone. These are examples of a broader crisis in the quality of care that the U.S. medical system delivers. The statistics in Memphis are repeated in community after community, endangering the health of millions. And it is not just the failure to deliver care that contributes to the quality problem. Delivering care that harms people—or delivering care that people do not need—is adding billions of dollars to the national health care bill and is one reason why so many Americans cannot afford health insurance.



While the health care crisis is national, care is delivered locally. That is why the Robert Wood Johnson Foundation (RWJF) is investing \$300 million in promising efforts to improve local health systems in Memphis and 14 other regions across the nation. Called *Aligning Forces for Quality* (AF4Q), the initiative brings an unprecedented commitment of resources, expertise and training to turn proven health care reforms into real results at the community level. The AF4Q initiative focuses on the full continuum of health care delivery—the care provided in doctors' offices,

The Robert Wood Johnson Foundation's Aligning Forces for Quality initiative is a \$300-million commitment of resources, expertise and training to turn proven health care reforms into real results in Memphis and 14 other regions across the country.

clinics and hospitals, and the support provided in the community. It also emphasizes reducing racial and ethnic disparities in care and strengthening nursing's role in improving quality. It advances three interrelated reforms that experts believe are essential to improving health care quality:

- **Performance measurement and public reporting:** using common standards to measure the quality of patient care and publicly disclosing that performance information.
- **Consumer engagement:** educating patients about their local health care systems to encourage them to demand higher-quality care and help them take a more active role in their own health.
- **Quality improvement:** implementing techniques and protocols that let doctors and hospitals raise the quality of care they deliver to patients.

This snapshot describes how the AF4Q initiative is being implemented in Memphis and the progress being made on these three main fronts.

How AF4Q is Being Implemented in Memphis

In 2006, RWJF selected the Healthy Memphis Common Table (HMCT) to implement the local AF4Q effort. Founded in 2003, the nonprofit collaborative began with a few local activists meeting around a kitchen table and now counts more than 150 groups and 1,000 individuals as partners. Today it unites health care providers, payers, purchasers, consumers and other stakeholders in efforts to improve health outcomes and the quality of care in Greater Memphis.

HMCT was chosen through a competition to find groups best positioned to make fundamental, cutting-edge changes to their region's health care system. In addition to expertise, technical assistance and training from national experts, RWJF is providing HMCT with more than \$1 million over three years and access to additional grants for specific projects.

HMCT has also drawn the federal government's notice as a promising national model. The U.S. Department of Health and Human Services recently added it to its national network of 25 Chartered Value Exchanges. Membership gives HMCT access to technical assistance that will enrich its AF4Q work, plus opportunities to learn from other collaboratives pursuing data-driven quality improvement.

Memphis Overview

AF4Q service region:

- 1 county: Shelby

Health system:

- General hospitals:¹ 10
- General hospital beds:² 3,468
- Primary care providers (M.D.s):³ 706
- Primary care physicians (D.O.s):⁴ 39

Population:⁵ 910,100

- White: 44.8%
- African American: 51.9%
- Asian: 2.1%
- Two or more races: < 1.0%
- American Indian or Pacific Islander: < 1.0%
- Hispanic: 4.2% (includes all races)
- Under age 18: 27.4%
- Ages 18–64: 62.6%
- Ages 65 and older: 10.0%

Per capita income:⁶ \$24,899

Uninsured (ages 18–64):⁷ 19.5%

Before its selection as an AF4Q grantee, HMCT was already working with local businesses, churches, health care providers and schools to stem the growth of obesity and diabetes in the region. Its goals for the AF4Q initiative include: (1) improving the quality of and reducing disparities in health care; (2) educating consumers about and helping them seek high-quality care; and (3) providing health care consumers and payers with tools to help them choose high-quality providers. HMCT has also created committees composed of doctors, nurses, hospital administrators and consumers to guide its AF4Q work in the areas of performance measurement and reporting, consumer engagement, and quality improvement.

Progress on Performance Measurement and Public Reporting

In most places in the United States, information about health care quality is siloed in a number of sources. The 15 AF4Q teams are forging relationships and breaking down barriers among health care providers, payers and employers to create common systems for collecting and reporting health care performance data.

In addition to collecting and reporting performance data, all AF4Q teams are seeking ways to measure and analyze their community's overall health. These efforts can help them identify public health interventions in tandem with improvements in care in clinical settings.

Memphis health care stakeholders already have considerable experience with performance measurement and reporting. Some local commercial health plans generate physician performance ratings and the state Medicaid program issues reports comparing some health plans' performance. The Memphis Business Group on Health (MBGH), an HMCT partner representing nearly 25 local employers and affiliates with some 350,000 covered lives in Tennessee and the Mid-South, also has a long history of helping its members evaluate health care providers based on quality and cost, known as value based purchasing. For example, it currently offers performance measures on Memphis area health plans and hospitals. It has also measured individual physician performance and pilot-tested a program to evaluate their performance against national standards of care.

HMCT, meanwhile, has helped create the Healthy Memphis Data Center to track the community's progress toward health goals in partnership with the University of Tennessee Health Science Center, the University of Memphis, the joint Memphis and Shelby County, Tenn., health department, and the health care consulting firm QSource.

For the AF4Q project, HMCT has decided initially to collect and report six nationally recognized measures of physician performance for preventive and chronic care. It chose the measures in consultation with the Memphis Medical Society (MMS), local health plans and MBGH and selected QSource to collect the data. It plans to provide physicians with reports for quality improvement purposes during the summer of 2009. After the data have been reviewed and validated, HMCT plans to release an initial report to the public during the summer of 2009 and a second report by the end of the year. Future reports will include more indicators, such as measures of patient experiences. HMCT also plans to produce a report on racial, ethnic and linguistic disparities in care by 2011.

In January 2009, HMCT collected information on patients' experience of care with Memphis-area physicians through a survey conducted in cooperation with local health plans, MMS and MBGH. The findings will be compiled into a report that will be released to the public in the summer of 2009 following a review of feedback from physicians.

HMCT is also working with the hospitals and the data center to publish quality-of-care reports for all adult general hospitals in Shelby County beginning in late 2009. The first reports will be compilations of quality indicators from federal health care agencies, the Leapfrog Group and similar sources.⁸ HMCT plans to add more indicators to future reports measuring hospitals' efficiency and effectiveness and patient experience of care.

Progress on Consumer Engagement

HMCT's goal is to help patients become more active in their own health care and to truly partner with their physicians. It works closely with the local media, public library system and faith-based health ministries to strengthen and promote existing community health education activities.

HMCT, for example, produces a weekly "Family Health...Take Charge!" column for the local newspaper. It also has partnered with FedEx, one of the region's largest employers, other companies and church ministries to distribute a brochure on high-quality diabetes care and self-management widely through the metropolitan area. The handout includes a list of groups with information on diabetes; tips on obtaining the best care; guidance on what to expect from one's health care team; and information on self-management and checkups. HMCT is working with primary care physicians to offer the brochures in their offices.

Looking ahead, HMCT plans to develop a city-wide patient and consumer advocacy council in concert with the National Partnership for Women and Families. The initial work will be in neighborhoods with identifiable health care disparities. HMCT also plans to begin training physicians in motivational-interviewing techniques and educating local health care stakeholders about value-based purchasing. It is also developing materials aimed at helping consumers recognize the impact of personal choices and self-care on their health and recruiting physicians to distribute the materials in their offices.

Progress on Quality Improvement

Quality improvement efforts in health care increasingly focus on lifting the performance of entire systems, not just that of individuals. All 15 AF4Q grantees have been asked to consider ways to create a permanent quality improvement resource in their community, for example by identifying or founding an entity or setting up a network to share knowledge and best practices on improving care.

HMCT's Memphis Quality Initiative (MQI) enlists local hospitals and their senior staff members in collaborative quality improvement efforts. HMCT hopes to incorporate more nurse leaders into those efforts through MQI, in part by obtaining at least one member hospital's commitment to participate in a front-line nurse empowerment collaborative and by developing a nurse quality improvement training curriculum.

HMCT is exploring the patient-centered medical home model—a model of care based on a strong doctor-patient relationship that emphasizes coordinated care over long periods instead of episodic care based on illnesses and patient health complaints—as a central quality improvement strategy. It is helping local physician practices overcome barriers to national accreditation as patient-centered medical homes and is offering them education on practice improvement, patient empowerment, and electronic medical record adoption. Memphis stakeholders are also working on a Medicare multi-payer demonstration project to help transform primary care practices into patient-centered medical homes. HMCT also publishes quality improvement articles in local physician publications.

Aligning Forces for Quality

The premise of AF4Q is that these strategies—public reporting and performance measurement, consumer engagement, and quality improvement—must be implemented in a coordinated way in order to lift the overall quality of health care. That is why the overarching goal of both the national AF4Q program and HMCT in Memphis is to bring community stakeholders together to drive change on these three critical fronts to improve health and health care quality.

For more information about AF4Q in Memphis, please visit www.healthymemphis.org and www.rwjf.org/qualityequality/af4q/communities/memphis.jsp.

Research for this report was provided by the Aligning Forces for Quality Evaluation Team at Penn State University's Center for Health Care and Policy Research, which is studying the AF4Q initiative to gain insights about community-based reform that can guide health care practice and policy. For more information, visit www.hbdev.psu.edu/CHCPR/activities/project_alignforce.html.

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¹The Healthy Memphis Common Table.

²2005 American Hospital Association Annual Survey of Hospitals (taken from the 2007 HRSA Area Resource File).

³2006 American Medical Association Physician Masterfile (taken from the 2007 HRSA Area Resource File).

⁴2004 American Osteopathic Association (taken from the 2007 HRSA Area Resource File).

⁵2007 Population Estimates—U.S. Census Bureau.

⁶2005–2007 American Community Survey 3-Year Estimates.

⁷2005 Census Small Area Health Insurance Estimates.

⁸The Leapfrog Group is a voluntary program working to make the reporting of health care quality and outcomes a routine feature of the U.S. health care system. For more information, visit www.leapfroggroup.org.